



THE
Social, Scientific and Political Influence
OF THE
MEDICAL PROFESSION IN THE YEAR 1886:
AN
INAUGURAL ADDRESS,
DELIVERED IN THE
THEATRE OF THE MEATH HOSPITAL,
November 1st, 1886,
ON THE OPENING OF THE
MEDICAL SESSION, 1886-87,

BY
LAMBERT HEPENSTAL ORMSBY, A.B., M.D., Univ. Dub.; F.R.C.S.;

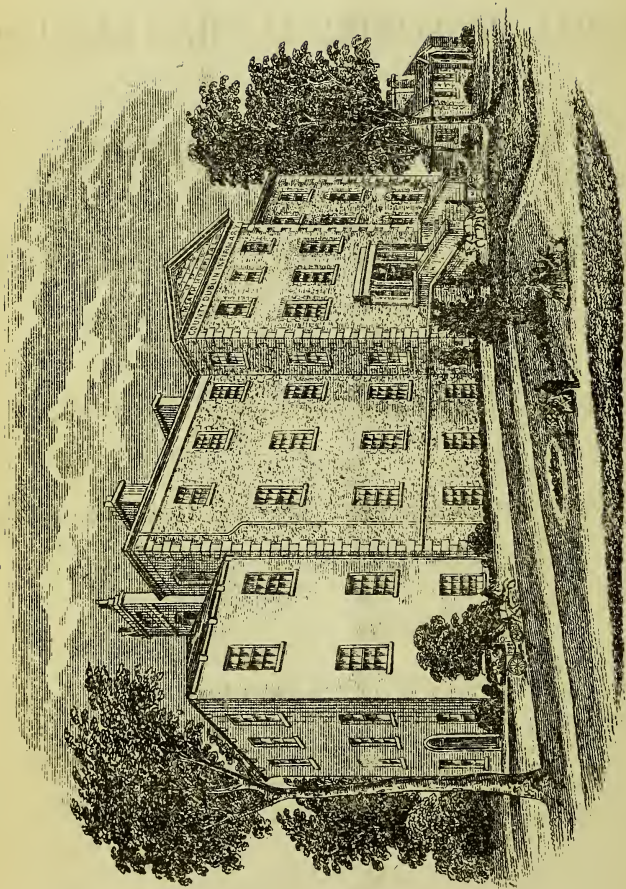
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SURGEON TO THE MEATH HOSPITAL AND COUNTY DUBLIN INFIRMARY;
SURGEON TO THE NATIONAL CHILDREN'S HOSPITAL, DUBLIN;
FELLOW OF THE ROYAL MEDICO-CHIRURGICAL SOCIETY, LONDON;
MEMBER OF THE CLINICAL SOCIETY, LONDON;
FELLOW OF THE ACADEMY OF MEDICINE, IRELAND, ETC.

(PUBLISHED BY REQUEST.)

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“FORTIS QUI PRUDENS.”
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1886.



MEATH HOSPITAL.

(6)

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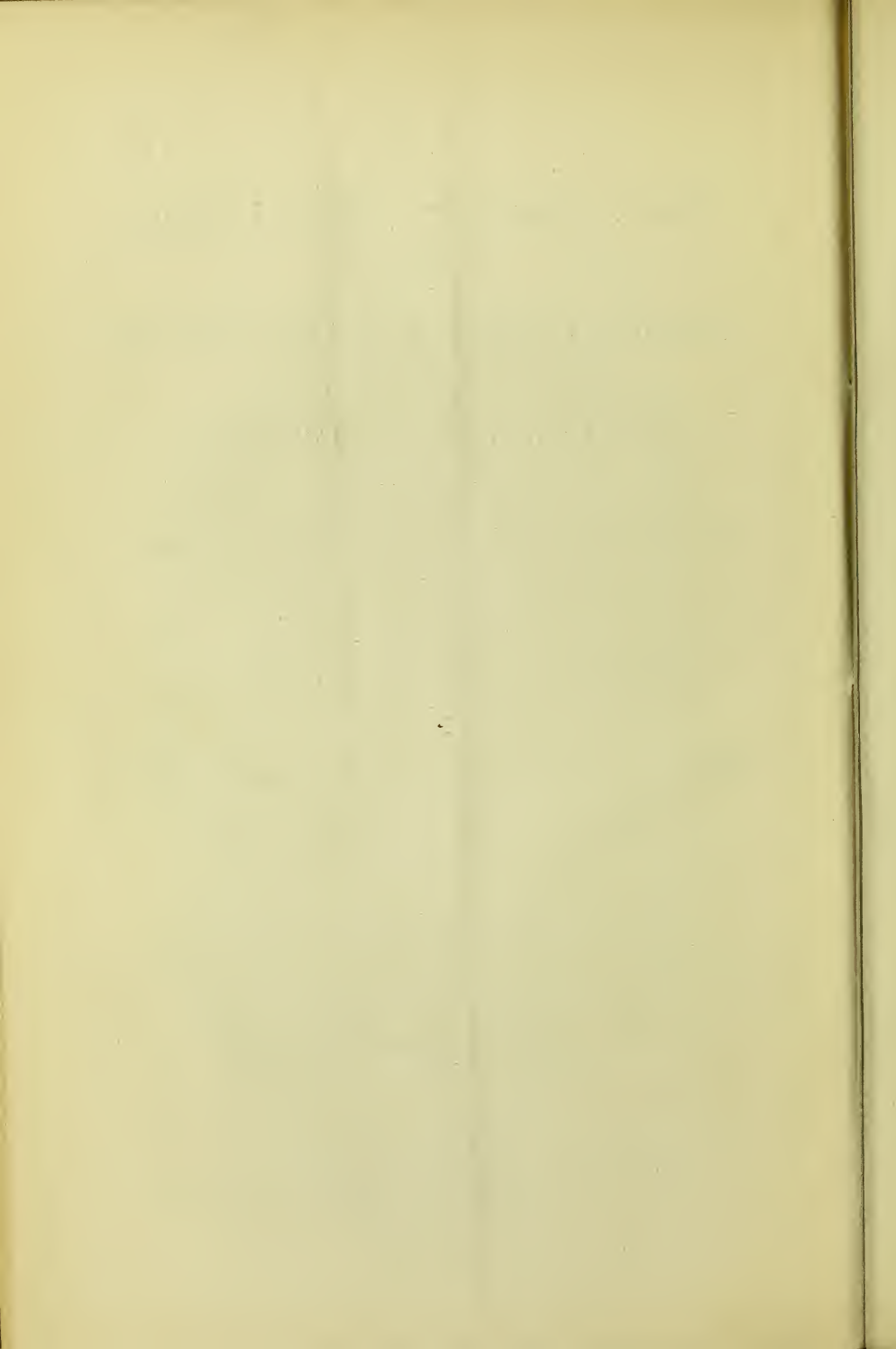
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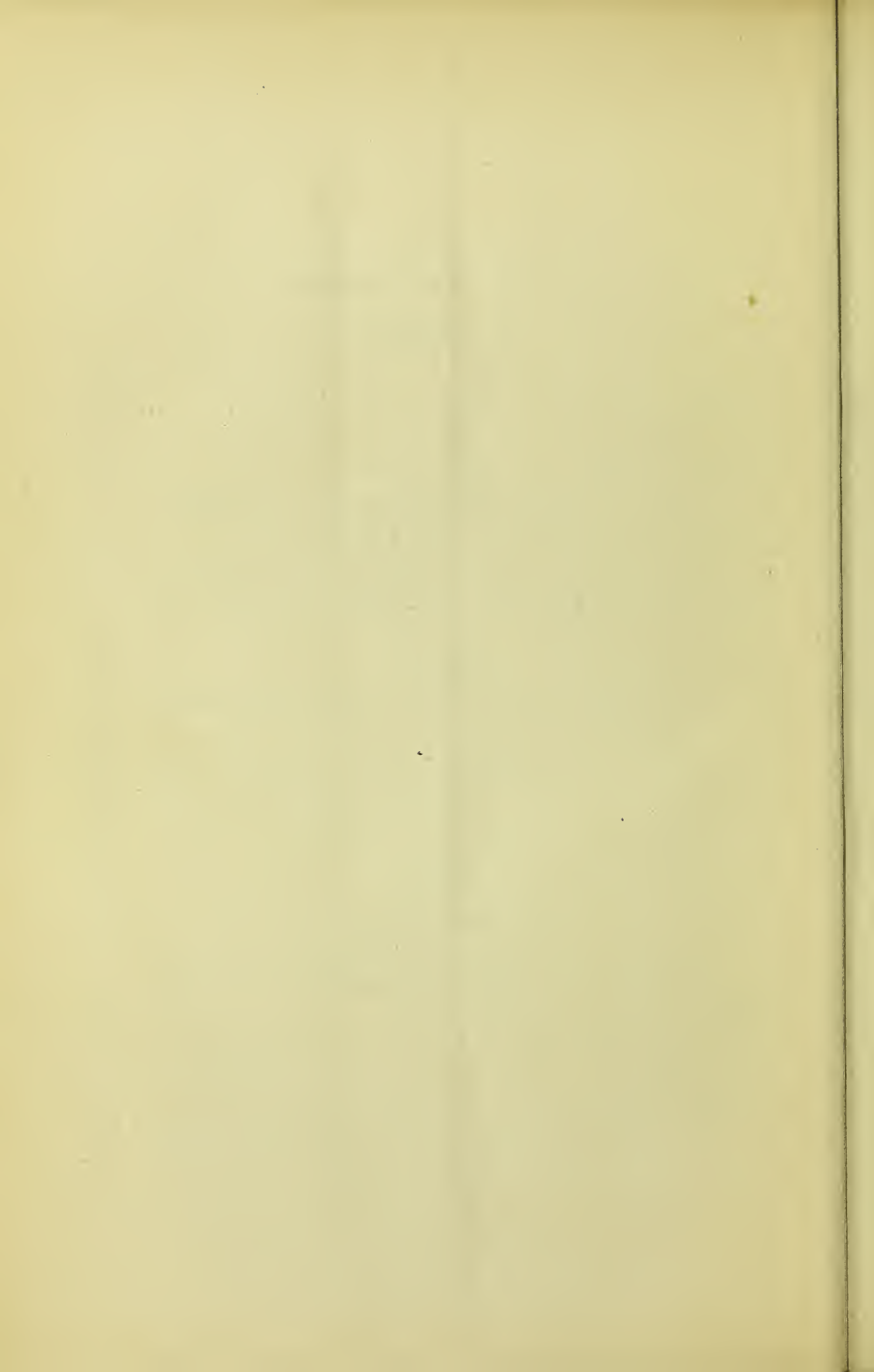
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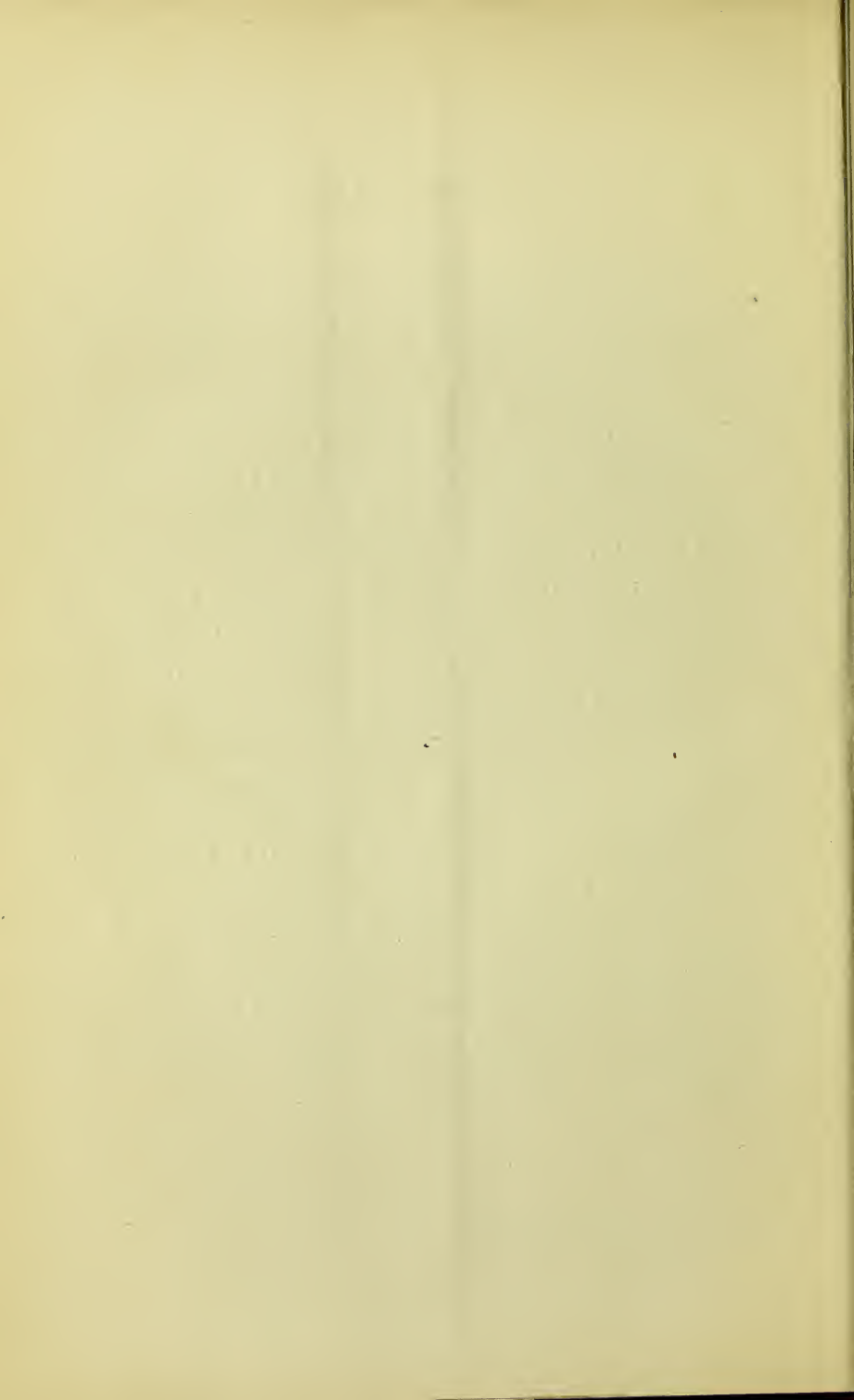


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P R E F A C E .

The following remarks were delivered in the Meath Hospital and Co. Dublin Infirmary on the 1st November, 1886, as an Inaugural Address. I am fully aware that, in the selection of the subject matter of my lecture, I have taken a new departure in leaving the beaten track of Hospital Lecturers on such occasions. I therefore feel that many of my ideas and proposals may be considered novel and Utopian, and will not at first receive all the support and attention I maintain the subject deserves. However, of one thing I am certain, the more the members of a learned profession show the public at large that Scientific Medicine and Surgery must and should take a very high place in our Social, Scientific and Political Systems, so much the more will it be allowed to occupy the position it is so justly entitled to. I am more than gratified to see that the Newspapers, lay and medical, representing all shades of political opinion, have written so favourably concerning my address, and testified how I have laboured, in an humble way, to elevate the tone and dignity of our noble calling.



ADDRESS.

THE SOCIAL, SCIENTIFIC, AND POLITICAL INFLUENCE OF THE MEDICAL PROFESSION IN THE YEAR 1886.

GENTLEMEN,

In opening the 136th Session of the Meath Hospital, I have been deputed by my colleagues, first, to wish you all a true and hearty welcome; and secondly, to offer you, who are beginning your career, our warmest congratulations on the choice you have made of the most noble of professions, and, to those who are resuming study, I would say, we trust that you will work with re-doubled energy this Session, and so give both a stimulus and bright example to your junior fellow students.

It is exactly ten years ago since I inaugurated the Winter Session in this place, and it is just twenty years ago since I occupied, for the first time, a seat on those benches as a very junior student, anxious to make my way in the world. My aspirations at that time were of a very modest nature; I thought if I was only a resident pupil what a remarkable person I should be; then, having become a resident pupil, I thought what an enviable position was held by a clinical clerk; then, to become a house surgeon was the summit of my fervent ambition. All this shows that we generally regulate our aspirations and ambitions very much with regard to the position we at the time occupy, for, I feel sure at the period I mention, I little thought I should ever stand in the responsible position, ten years or twenty years afterwards, of being your instructor and guide, as I am this day. However, I presume, the maxim is as true in my case as it is in everybody else's, that "we little know what is before us." On such occasions as this, it is usual for the lecturer, in opening the Session, to select some topic of passing interest wherewith to engage your attention for a very long hour or fifty minutes. Sometimes the subject is interesting, sometimes it is not; all the same, politeness, on your part,

prompts you to keep very quiet, as silent and admiring listeners. The selection of the topic of my address to-day I can assure you was, for some weeks, a great mental puzzle to me, being anxious to please such a number of hearers, lay and medical, and I should also strive to arrange my subject in divisions and sections, so as to say something interesting and suitable to all present. If I merely drew up a sermon full of fatherly advice for the first year's students, telling them if they wanted to get on and succeed in the battle of life they must be all good boys, which, in the abstract is strictly true; still, this oft-repeated tale would be anything but interesting to the senior students, who have frequently heard me or others on the same subject before. Then, I knew, we should have a number of qualified brethren, senior and junior, present, and they would hardly go to the trouble of following me through high-sounding platitudes, with a sprinkling of a few lines of poetry, here and there, just to make it read well in pamphlet form; and, lastly, I knew, we would be honoured by several distinguished visitors—Governors, Members of the Managing Committee, and strong supporters of the institution, who, naturally, might expect to hear something interesting, if not instructive. Easy as you may think it was to strike on something new, I can assure you I found it very difficult, for we seem to have arrived at that stage of our existence that all favourite general topics of passing interest are thoroughly well thrashed out.

However, at the risk of pleasing some only of my hearers, I select, for my address, the following subject:—"The Social, Scientific, and Political Position and Influence of the Medical Profession in the year 1886."

The topic no doubt is a large one and embraces a wide field; however, in my allusions I will be as brief as the subject will admit.

The social position of the profession may best be viewed as regards the different countries and services we meet with in its members:—

As regards Ireland, the country most interesting to us all. In the past, the metropolitan physician and surgeon was generally a man sprung from the ranks of aristocracy and highly educated. Now, however, we find all social grades of society entering the profession if they have the inclination and means to enter it. No one is debarred. All have the same chance to win their way to position and afflu-

ence. I would say, however, of all professions the Irish medical man should be a thorough gentleman, in manner, feeling, and address. If he cannot boast of the bluest of blood let him faithfully emulate the high-toned principle that characterises the gentleman in its true sense, which should be the mainspring of all his actions and which proves so acceptable to the many patients he is called on to visit. I would make now what might be considered a bold assertion; but of its truth I am convinced, that in no part of the world does a thoroughly educated physician or surgeon and a gentleman by birth, occupy a higher social position than in Dublin, and very properly so. Among the ignorant idlers who infest the social circles of all large cities I have no doubt many are so devoid of brains as to look on their metropolitan medical adviser as hardly fit to associate with, except on purely professional matters. This, however, will soon be a thing of the past. As there are degrees in trade, law, the public services, and other lines of life, so are there degrees of social standing in medicine and surgery. For in trade, any ordinary individual can understand the difference between the social position of the prince merchant and that of the small huckster, and yet both belong to the same calling. In the great profession of law we have the same degrees of social standing. We have the Lord Chancellor at the top of the social system and the respectable legal practitioner who practises in the Lord Mayor's Court, and yet they both belong to law. Throughout the country our profession occupies as good a position as any other. Of course it can be easily understood that a good deal depends on the individual as well as on the profession to which he belongs, also as regards his previous social position and family surroundings. I was recently very much amused by a case in a court of law which went to show how very strongly the patronizing prejudice occasionally exists in half-educated minds in some parts of the country among what we are pleased to call the *élite* of Irish society. The witness was a lady—at least so it would appear—and she was asked if a certain country practitioner was a friend of hers. She seemed to deny the fact. She was then asked if he was not a constant visitor at her house, and a partaker of her husband's hospitality. She said yes. She was then asked why she said he was not a friend, to which she answered, "well, he was not our friend, he was only our family doctor." Only our family doctor, only our lawyer, only our clergyman, only

our banker, only our merchant, and many other *onlys*. I would like to ask this very particular lady what she would do, and nine-tenth's of the human race, without "our family doctor" whom her ignorance and prejudice, of a by-gone date, so designates. There is no doubt that many depreciating influences are at work to more or less vulgarise the medical profession and its members.

First—We have to contend against the great influx of very low persons who now enter the profession without birth or refined feeling enough to realise the utter shipwreck they make of their calling if not suited to practise it as it ought to be practised.

Again—There has not been up to the present any uniform State-qualifying examination through which all must pass before entering the profession in the three kingdoms. There have been at least twenty or even more portals, so that each licensing body, in order to attract or encourage men to enter it offers, or pretends to offer, some special advantage. In this way many very badly prepared and half-educated men thus get their names on the register year after year.

Moreover—So long as you have a profession, or licensing body allowing its members to adopt the low scale of fees beginning at 6d. for advice, consultation and medicine included, what can you expect but a downward course of appreciation on the part of the general public; and I can assure you there are many men so pressed by the keen competition that exists that they have adopted such a scale of fees and advertised same in handbills and on the windows of their establishments and other disreputable means. No matter what may be said by partisans and supporters of this system, that they are merely following the great principle of political economy of supply and demand—that they must either take what they can get, or give advice and medicine for nothing, and thereby pauperize a class who have no right to be recipients of charity, or else allow the public to take advantage of the advice of the chemist or druggist over the counter. I care not who listens to me, or who afterwards reads these observations in print. I firmly believe the system of low fees charged by general practitioners for drugs and medicines alone, in fact for the mere mechanical agents of treatment, and not for the exercise of brains and judgment which select them, called advice, has done more to produce professional demoralization in the rank and file of our order in England and Scotland than anything else, and

has been the cause of the low place which those who follow the practice are asked to occupy in the social system of modern society. And in saying this I do not quarrel with the general practitioner; I quarrel with the system, and hope it will be improved. My object is to elevate the entire body in the professional scale to a level commensurate with the true value of its services. The Dublin hospital physician and surgeon, holding high university degrees, accustomed to charge one or two guineas for each visit, sometimes occasionally allowing the patient, according to circumstances, to visit him a second time for the same remuneration, but never taking less at any time than the sum named, may well exclaim, when he hears of the low scale of fee adopted in the sister kingdoms by fully qualified practitioners—surely such a system of cutting under must have a depreciating effect, and lower the status and social position of the profession in the eyes of the public who are persuaded, in the long run, where such a system is practised, that their doctor is only a vendor of drugs and nostrums, and merely one of the necessities of life (just as the chimney-sweep is called in to ply his calling when the chimney wants sweeping), instead of looking on the physician and surgeon as the disciple of light, wisdom, and politeness, honourably and scientifically battling with the great universal enemies, disease and death. If I have laid stress on the extravagantly low fees charged by medical practitioners, I have as strongly to condemn the excessive scales of remuneration charged by very mediocre and unprincipled men; for such gross attempts at extortion bring disgrace on a profession which should be of the noble—noble. The men who extort money in this way are not mere vendors of drugs. They hold high degrees and diplomas and thus the evil and scandal are the greater. If the colleges did their duty and had the moral backbone of their conviction they would put a stop to such conduct at once. It is easy enough to find out the offending parties, but, as I say, the colleges have not the moral courage to purge themselves of the vampires of the profession; but they wink at the system which, of course, continues. While saying this I am fully sensible of the fact as regards fees and forms of remuneration that there must be considerable difference in the higher ranks of the profession, for every man values his time, experience, and skill according as it is appreciated by the public.

Fourthly—Another disadvantage the profession has to

contend against, to be found in the country and rural districts rather than in the city, is, that the income derived from professional practice in the country in a sparsely, inhabited district is not sufficient in many cases, by itself, to enable the medical man to support his establishment and pay for the education of his children. Many a man may adopt a certain occupation, such as farming, for amusement or pleasure, but a medical man imbued with the love of his work should not be compelled to take to a business outside his calling as a sheer necessity simply because he is unable to make a living out of a profession that peculiarly requires undivided and life-long attention if one ever wishes to soar above the heads of other callings. For it has been said, and truly said, that scientific medicine and surgery is the noblest of professions and the *vilest of trades*.

Fifthly—Another deterioration which the Bar certainly does not suffer from, but which we do, is that the medical profession is not necessarily metropolitan which the Bar certainly is; for in the remotest corner of the country we must necessarily find the medical man practising among people who, socially and scientifically, are very inferior to him in their attainments, and who are unable to offer him any advantages in his social intercourse; and in this way he loses tone in his conversation, in his dress, in his manners, in his influence, and occasionally he contracts habits which certainly cannot be commended. In this censure, I certainly hope that I shall not be misunderstood. I by no means wish to imply that this is the general rule. I merely wish to say some few do thus descend, and I am happy to say that these are the exceptions, but, as is always the case more or less, the irregularities of the few bring a certain amount of censure on the whole as a class, and metropolitan as well as provincial brethren must suffer from the discredit, and this defect is only natural and human. When one has not remunerative business, when one has no one to converse with on topics of a refined and enlightened character, when one has no one to imitate as an example, when one has no one to remind one of the rules and regulations of modern and polite society, naturally it is only human to degenerate a little. Not so with the men who have the good fortune to practise their profession for many months in the year in a city where the rules of society must be more strictly observed. We are also the servants of the public, liable, at a moment's notice, to be called from our

comfortable firesides on the most rigorous winter night to visit patients at a distance, perhaps suffering from some infectious disease, and to reach whom the Dispensary doctor must travel the most lonely roads, through rain and snow, sodden bog and bleak mountain pass, and then be expected to cope with disease in some wretched cabin, where the most simple laws of sanitation are utterly defied. And should we refuse to obey the summonses of the "red ticket," we would be called selfish and inhuman, though in no other calling in the world is a man subject to such hardship, and such daily and even hourly risk of life. He would also, if he refused, be subject to the censure of an illiterate Board of Guardians, and the possible loss of his appointment by sealed order from the Local Government Board.

Sixthly—We, then, have the depreciating influences of QUACKERY. Who has not heard of bone-setters, plaster and cancer-curers, amateur doctors, and many others, who practise their art in a deft and apparently very successful manner for a time? Why does an intelligent public like and patronise quacks? I often ask myself. They don't like *quack* lawyers or quack engineers, but the quacks who minister to the body and soul are much run after by the public, leaving those who devote their entire lives to the intricacies of theology and medicine for those who are ready to venture any garbage on the souls and bodies of their fellow-creatures, not knowing the danger they are risking on the one hand, and not caring very much on the other, being only quacks, who cannot be held responsible for malpractice, as their *cure all* is known to be simple and unattended by risk. In England and Ireland a person can easily judge the amount of quackery that goes on by reading the startling advertisements and warning voices in second-rate newspapers, leaded out in effective type to catch the eye of their too-willing dupes—the cases they have failed to relieve or cure being never mentioned, and those who were supposed to be cured having had nothing whatever the matter with them. In all large cities and the colonies quacks ply a most successful trade.

Seventhly—And lastly we must fight against obstacles until the general masses are properly educated so as to understand correctly and clearly the grades and social position the profession and its members ought to occupy. This depreciating influence is the absence of suitable state recognition for the leaders of medicine and surgery. In the

constitution of our governmental system there should be (and it is imperatively called for) the Minister of Health or Sanitary Science, who should occupy a seat in the Cabinet, and to be only filled by a physician or surgeon of eminence and ability, and not bestowed on some *worn-out* practitioner, when his limbs are feeble and his brains past their work, which is the constitution of very many Cabinets of late—not, indeed, the present, which, it is hoped, will produce results commensurate with the reputed ability of its active members. To allow the destinies of a great nation like England to be in the power of a worn out brain of 75 or 80 is simply suicidal, ridiculous, and necessarily fatal to the best interests of the Empire. My suggestion may be Utopian, and not likely to be adopted at once, but if England intends to take a creditable place in the future among the great nations of the world she will set her house in order, for government in the present day and government a hundred years ago are very different affairs. Scientific medicine must and will take an exalted position in the world when the component parts of the great ship of State are properly arranged and reformed. The profession of *law*, with its Legal Peers and Lord Chancellors, the Army with its Military Lords, and the Church with its Spiritual Peers, must, in justice, give places of emolument and position to their *Cinderella*, but scientific sister, Medicine. Therefore, the Minister of Health and Sanitary Science must be an appointment in the future, and at no distant date. I presume there is no one among us that will doubt my assertion, that the entire community, from the peer to the peasant, stands indebted to scientific medicine and surgery. Have not all our investigations, from the earliest times, been directed for the preservation of man's best interests, viz., the prevention of disease, the cure of disease, and the alleviation of human suffering. Therefore, it seems to me that, unless the leaders of the profession of medicine and surgery make a decided stand for their dignity, misconception will continue to exist. With regard to the true status of the profession, when medicine and surgery were practised by illiterate men, who were barbers as well as bleeders, there was, perhaps, an excuse for the absence of State recognition; but now there is an impassable barrier to prevent such persons being identified with the "healing art." Our noble profession can only be entered as the result of a thorough course of practical training, and through the ordeal

of a series of searching examinations at universities or colleges. Hence it is at the present day that its members include men of the highest intellectual culture and social position, men who have made their mark in the world of science by their discoveries and inventions. I allude to such men as Jenner, Paget, Gull, Lister, Spencer Wells, Clark, Bowman, Playfair, Thompson, Haughton, and many others too numerous to mention. With such illustrious names, however, I fail to see why Medicine should not be represented among the peers as a tribute to science, just as literature is represented, and indeed all the learned professions except our own. Moreover, I fail to see why the profession of medicine should not hold at least as high a place in the public estimation, and, therefore, in that of the State, as any other profession; as, for instance, the Army, the Navy, the Bar, ay, even the Church itself. But, as regards State recognition, the medical profession, in comparison with the others, comes last of all. In the House of Commons, while there are upwards of 130 barristers, and over 100 military men, there are only 10 medical men. The barrister knows full well that to get into Parliament is, in many instances, the ensuring of his future livelihood. He has little to lose and everything to gain by entering Parliament and sticking to his party. Not so with medical men: when they enter Parliament they sacrifice their practice and lose much, but the gain is with the community at large. Therefore, there should be some means whereby the medical man should be recouped for loss of time, practice, and money, when he has become an advantage to the public at large. The public can easily judge what a gain it would be to the community to have the benefit of the experience of medical men in legislating for the prevention of disease, and the promotion of the health and comfort of the working classes. How many important medical subjects are continually being discussed in that legislative council from time to time, in many instances decided by those whose knowledge must be immeasurably inferior to that of men who have devoted their lives to the consideration of the question. Among the many subjects about to be brought before Parliament at no distant date, and which emphatically demand the best attention of a sound medical opinion, I may enumerate the following:—The health and management of prisoners, the treatment of habitual drunkards, over-crowding and proper housing of the working classes, further restrictions as to the pollution of

rivers, opposition to compulsory vaccination, the improvement in the Lunacy laws, improvement in the Sanitary laws, the Contagious Diseases' Act, and last, not least, the Vivisection question. Therefore I repeat that our scientific profession should be properly and fairly represented in both Houses of Parliament, as are the sister professions, so as to assist in deciding and discussing great and momentous questions. Precedent, I am aware, is against my proposal ; but precedent has been a stern taskmaster in the past, and it is quite time that the word should be expunged from our vocabulary—so far as our profession is concerned—where it debars its members from taking their proper place in the Senate. The value and utility of precedent cannot be gainsaid, but, like an unreasoning force, its effects, for good or for evil, are not to be reckoned upon, and its operations are often inexplicable. The dispensation of honours and dignities by the Crown to medical men—as a matter in point—has a mystery attached to it, and if we seek an explanation precedent is thrust before us as a sufficient reason. The copious showers of honours that fell when the two great parties in the State changed sides last autumn might have been thought sufficient to have reached some eminent member of our profession ; but, no ; the refreshing out-pour descended only on politicians and party men. The abundance of the shower suggested to *Punch*, the sketch of the meeting of two *cabmen*, one of whom confesses to the other his extreme nervousness in opening the newspaper in the morning lest he should, unawares, find himself gazetted a “hearl” or a “barrenet.” Yet so it is ; all grades of Her Majesty’s subjects may look within the gilded portals of the House of Peers ; and to those among them who aspire to enter, no insuperable barrier is reared, provided always they eschew the practice of medicine, and are not included in the list of recognised medical practitioners. Political sycophants, courtiers, lawyers without number, churchmen, solicitors, soldiers, sailors, literary men, artists, financiers, bankers, merchants, manufacturers, may be elevated to a peerage, but a medical man is pronounced by precedent ineligible. Is it because some prejudiced premier once said, when he was asked to recommend a peerage for an eminent physician that, he must decline to do so because he would not have as an equal any man upon whom he could call for what he was pleased to represent as a *menial service*.

Why is England so sadly behind other countries ? Look,

for instance, how the profession is treated in Germany. There, when the medical man has earned, by his labours for the public good, the recognition of his monarch, he receives a patent of nobility and a high place in the social system, because he is a man of science and extended knowledge. I would wish to know is the arbitrary word precedent always to exclude men who happen to embrace medicine as a profession, who possess, in many instances, far bluer blood, and a far more ancient and honourable pedigree than many of the members of *modern* society, now called aristocracy? In ancient days the nobility stood forth as a distinct class of human beings, surrounded by a glamour of their own importance, and with special privileges and immunities, and few were the avenues of approach for those who, no doubt, sought to rank with them. A nobleman literally means a man who acts nobly, and devotes his life to noble aims, noble efforts, and noble deeds, after the manner of a Shaftesbury, a Brabazon, and many others. But in this our day all is changed; occupation in commerce, in trade, in literary work, in military achievements, and indeed in all affairs, medicine alone excepted, is not held to mar the escutcheon of the peerage, nor to be a bar to its attainment. On the the other hand, good grounds may and can be shown why medical men should be called to the Upper House. They are not wanting, as I said before, in education and brain power—not incapable of holding a high position amongst their fellow-men. They have the advantage, during their professional career, of obtaining a wide knowledge of the wants and conditions of all classes, and are, consequently, good and ready authorities in all social problems. I think, as the world is now running, a single generation, doubtless, will suffice to efface all such distinction, and those who choose to wait for the revenge time certainly brings, will very soon find full satisfaction for their slighted feelings. No doubt caste prejudices, and the love of an artificial standing, have still tremendous force, and will die hard, when the struggle commences, before the barriers set up by centuries of separation are removed. Nevertheless, the shrewd observer of the times cannot but notice vast social changes silently and surely at work. The peer now-a-days descends from the pinnacle of hereditary distinction and grandeur, and mixes in the arena of commerce, trade, and other laudable but once, according to his idea, plebeian occupations; for instance, a duke becomes a partner of the general provider; a noble

marquis sells coal in the London streets, and quite right too, if he gives a good article at a fair price; peers join with per-ruiquiers in carrying on the business of hair-dressing in the Burlington Arcade. We are told while others take to the stage or assume the role of the coster-monger, several noblemen and impoverished baronets are driving for hire hansoms in London, and not a few are large cab-owners as well. The brother of the Queen's son-in-law sells tea, and another of the same family is a broker, dealing in stocks and shares. I wonder very much some of their lordships do not take to medicine. I am sure it is as elevating as cab-driving. Marriages, again, that, according to old narrow-minded traditions, seem ill-assorted, have proved undeniably happy. In the prevailing dearth of good alliances, blue-blooded parents, according to a Foreign Resident, are glad enough to accept plebeian offers that promise substantial settlements. This is said to be especially true of those who come from beyond the Atlantic. No very searching inquiry is made into the origin of the fortunes that American heiresses bring their high-born English and Irish swains. There is no stain in trade and professional antecedents provided they are geographically remote. Where home-grown bank notes might be despised, foreign dollars are acceptable, no matter however made. After all, it seems to me that there is a great deal of sham and unreality in what is termed modern society, and that it is but natural that the social gulf which has so long interposed between the prosperous, professional, and trading classes, and those that deem themselves superior, should be bridged over. There is really but little distinction or difference between men of a certain standing. We, as medical men, know that, when suddenly called to the bedside of all classes, the mask of social superiority and distinction is entirely removed; and the slightest observation and inquiry will prove that all possess much the same aspirations. The same tastes have been similarly educated, display the same weaknesses and, perhaps, vices, and follow very much the same ways and forms of life. *Statesmen*, in exalted positions, are frequently in the habit of making use of statements which they either don't mean, or seem not to have the moral courage to carry into effect. For it seems to me that nothing but the blindest prejudice—a prejudice unworthy of enlightened and honest statesmen—can have so long stayed the hand of the Sovereign, and prevented the elevation of representative men

of our order to seats in the Upper House, which Lord Salisbury once told the country was chiefly valuable because it represented success in all lines of public usefulness, from commerce to statemanship. The late Lord Beaconsfield also stated in a speech delivered on November 9th, 1875, "that a policy that diminishes the death rate of a great nation is a feat as considerable as any of the decisive battles of the world." Mr. Gladstone, too, has frequently spoken in strong terms of admiration of the increasing importance of medicine and the medical and surgical professions. "That profession," he said, "presented a future of the highest interest. There was in that future the probability that it would gain increased influence, greater as compared with other professions." And only the other day when our distinguished Viceroy, the Marquis of Londonderry, was replying to an address of welcome from the College of Physicians he made use of the following :—

"Mr. President and gentlemen, the assurance of your devoted loyalty to our beloved Queen, and the warm greeting you have accorded to me as her representative, affords me the greatest satisfaction. I am well aware of the importance of the work undertaken by your College, and I rejoice to know that it discharges the duties which have been entrusted to it with advantage to the community and with credit to itself. In no part of the empire—indeed, I might add in no country of the civilised world—does there exist a more admirable system of medical charities than that which has been established in Ireland, and it is most gratifying to find that by the efforts of institutions such as yours the beneficent provisions of the law for enabling our sick poor to obtain gratuitous medical assistance are so carefully carried out in all parts of the country. I sincerely trust that your good work may increase and prosper, and that the world-wide fame of the medical schools of our metropolis, won for them by the genius of the great Irish physicians in the past, may ever be maintained by the ability and worth of their successors. In all matters relating to the public health her Majesty's Government shall continue to look to you for advice and assistance.

There is no doubt these statements are very true and complimentary, but I regret to say they have proved mere empty words, at least up to the present, for many such observations have been made from time to time concerning the superiority and high standing of the Irish School of Medicine and Surgery, which, I firmly believe, ranks as high as any

in Europe. Still I regret to find many of our countrymen, nobles and others, have been unpatriotic enough to habitually leave Dublin, and its famous School of Physicians and Surgeons, to seek advice on trivial matters in London and elsewhere. And what decoration does our profession get in reward for scientific research? An occasional baronetcy or knighthood. Take for example our own country, Ireland. Have the honors and public recognition due to the leaders of the profession in the three countries been fairly and evenly divided? Have we not cause for complaint? Why should not surgery and medicine have each a baronetcy? They had in years gone by. Why not now? If not a baronetcy why not a K.C.B.? We may be told that men in days gone by were giants in the field of science. I don't deny the assertion, but with the advance of education, scientific, sanitary, and hygienic knowledge is much more evenly distributed, so that we do more, know more, and save more lives than our great predecessors. The science of medicine and surgery is advancing with giant strides. The successive learners of one generation become the advanced teachers of the next. Very different is it with the profession of the law which has advanced with comparatively tardy progress. The experience and the good sense of our judges must yield to the dictates of precedent, and the decisions of juries be made to harmonise with their decisions. In fact much of the law of the land is but a record of its rulings and not the product of the wisdom of our law makers. Divinity, of which I would speak with respect, is said by some to be centuries behindhand. It is at least unfortunate that some of its own disciples, if not actually afraid of scientific research seem fearful that they may be unable to reconcile themselves and their views with the teachings of the scientist. Not so, however, with us, for from the earliest period of the world the science of medicine and surgery has been esteemed among the noblest occupations of the mind. Amidst the varied pursuits of educated men it would be difficult to find one more calculated to inspire with intellectual ardour or to kindle the energies of thought and speculation for the advancement of science, for the open book of Nature is ever before us, and we gladly welcome all science, all knowledge, and all truth that will make the healing art more complete and more potent for good to mankind. Remember it is mind that does the work of the world. Mind is the great leveller of all the arbitrary distinctions in our social

system. A thinking and ardent mind will take nothing upon trust, but will trace the streams of knowledge to their source, and will investigate its springs before it avails itself of the force of the current. In order to carry out the aim of my discourse I must not dwell much longer on the social aspect of the profession. In the present day I believe the social position of the profession will improve in an exact ratio as its members endeavour to maintain the honour, the dignity, and reputation of their high calling.

I must now dwell for a few moments on the second part of my theme, the scientific influence and position of the profession in the present day, and I would say, to no class does science owe so much. Medical men from the days of Hippocrates have all along the line been the pioneers and promulgators of science. Contemplate for one moment their incessant toil, the varied, intricate, and in some cases most dangerous investigations in the cause of scientific truth, the combined result of all being that the community at large have alone derived the advantage of their labours. What has the disciple of law, divinity, or arms, as a body, done for science? Think of the enormous debt of gratitude that ought to be bestowed on medicine and surgery, and this fact can never be told too often when the ignorant, the ungrateful outsider attempts to depreciate and minimise the labours of the profession. You may ask me briefly to name a few of the advantages that scientific medicine and surgery have conferred on mankind. When toiling in the paths of science the immortal William Harvey discovered the circulation of the blood in 1619. The discovery of the advantages of vaccination by Jenner in nearly stamping out that loathsome disease, smallpox. The introduction of anæsthetics into general use during the performance of painful operations by Simpson in the year 1847, whereby a patient can now, with a minimum amount of risk, be placed in the mysterious sleep of unconsciousness, unmindful of all pain, relying only on the goodness of the Creator and the skill of the operator. Then we find that surgical science has made the most rapid strides in the direction, one might almost say, of finality. Cavities of the body are now explored that were once considered sacred from the surgeon's knife. In reference to this subject Mr. Erichsen says:—"For what is termed scientific surgery is of comparatively modern origin. It could not exist when the natural sciences had not existence

as such. When chemistry was in the hands of alchemists, when astrology was a recognised element in medicine, when remedies were applied to the weapon which inflicted the wound in order sympathetically to cure that very wound, scientific surgery was still unborn, and in this country we date its birth from the days of John Hunter and have made the great biologist its sponsor by giving it the term 'Hunterian.' Art is final but science is illimitable. We have reached finality in the mere mechanical art of surgery, both as to the expansion of its limits and the precision of its practice. But we are yet on the very threshold of the science of surgery. We have yet to learn much from that compound science biology in its application to the elucidation of surgical problems, that compound science of modern creation into which physiology, and histology, pathology, chemistry, and physics enter, which works by means of experimental research, and I venture to think that this is the time of investigation which promises the greatest and most useful results in the cultivation of surgery in the immediate future. If we look to the brilliant results that have already followed the application of research to practical surgery we cannot doubt that many of the unsolved problems of surgery will in the future have to yield up their secret to the student of research."

Many a pioneer of medical science, however, has not been spared to see the incalculable advantages that have been conferred on the public by his scientific labours, for the lives of the physicians and surgeons are not unfrequently sacrificed in the honourable discharge of their calling; one is cut off in the full strength and vigour of manhood, the victim of acute disease contracted in the struggle with the great foe; another fades before his time, withered by incessant toil and never-ending mental strain; but each alike passes to his well-earned rest in the realms of light and immortality followed by the good will and blessing of those whose sufferings he has alleviated, and happy in the assurance of having gained the admiration, respect, and gratitude of his fellow creatures. The study, therefore, of our profession in 1886 is minutely scientific. All our deductions are based upon purely scientific investigations; all hap-hazard treatments are things of the past. Sad, indeed, it is that the exigencies of life compel us to descend to the common-place duty of earning a livelihood for our families instead of remaining in that elevated paradise of science and truth, worshipping it as the dearest idol

of our heart. However the world is so very wisely and conveniently constituted that many an important scientific truth has been arrived at by a sub-division of the work among many investigators in the same path of science, and the result of each arranged and tabulated, when the work is finished, by one great master mind. In this way, by the union of the practical and theoretical worker, the labours of our German, French, Austrian, Russian, and American brethren have been united from time to time to our own labours, conferring on mankind the advantages too incalculable to contemplate. Is this remark too strong? Am I to be told that the idea of anæsthetics was arrived at by the labour of one man alone. The introduction of antiseptics into the practice of surgery, was introduced by Lister, but was it the work of one man alone will anyone dare to say? Was it not a boon of enormous advantage to the human race giving an impetus to the progress of operative surgery nearly as great as the introduction of anæsthetics. Although the public occasionally are slow to appreciate our scientific labours we have an institution that we may well be proud of, and one which has helped to make England famous in the scientific world. I allude to the Royal Society of London, which knows no creed, no politics, no social class. Its object is pure and untarnished, as it was simply established for the furtherance of truth and science, and for the recognition of original scientific work. The humble, and it may be unknown, worker will surely find his investigations carefully weighed and duly acknowledged by the conferring of the blue ribbon of science (the fellowship of the Royal Society), a reward far greater and perhaps more to be desired than the highest honor the state can bestow; and I am delighted to say that being an Irishman is no bar to its distribution, and physicians and surgeons have more frequently been the recipients of this much-coveted and enviable distinction than any other of the learned professions. I must now say a few words as regards the political influence of the profession in the present day. Ten years ago when I addressed you there were but four medical men in the House of Commons, now there are ten, but even this increase is by no means a sufficient representation of their wants and wishes. There are statesmen who are ignorant enough to say they do not know why doctors want to go into Parliament. Well, in answer to to this, they really do not want to go into Parliament, only the ordinary politician is so thoroughly ignorant of

all matters of medical science, such as hygiene, sanitation and public health, that if the well-being of the masses are to be looked after medical men must be induced to enter the House of Commons. The question arises, however, How can a man afford to give up his practice and lose so much a year for the cause of the public at large; and such self-denial is, to say the least of it, rare. If medical corporations wish to have medical representatives who are in touch with their present wants and aspirations they must pay their representatives so much a year to make it worth their while to remain in Parliament and represent their views. Few medical men are able to put together large fortunes until they are advanced in life. At first, no doubt, there may be some little difficulty or jealousy in the selection, but the right man will turn up in the right place, and it is to be hoped that he will be a man who is thoroughly in accord with the wants of the great profession, and, having engaged in the practice of it, be better able to understand what will most conduce to its best interests. Unfortunately when a medical man has made a competence and could afford to give up practice and enter Parliament he is far advanced in life and has lost most of the ardour and energy of youth and become wedded to very conservative and it may be obsolete principles of practice. He, would, therefore, be put a poor representative. The man to represent the profession should be a comparatively young man, for this is the age for young and vigorous men. Lord Randolph Churchill by his indefatigable zeal and ability has become leader of the House of Commons at the early age of 37 a standing proof that brains, energy, and keeping abreast of the times in a young man are more easily recognized in the present day than they used be in the past. Lawyers have possession of many of the seats we ought to have, and we would not dispute their right to hold them if they had only acted fairly by their sister profession, and obtained from the Crown and State by proper representation in the right quarter those rewards and positions that a scientific profession is justly entitled to; but no, they and their own interests as place-hunters have been unfortunately for medicine and surgery, their dearest object. The University of Dublin and many of the other educational bodies must be represented by medical men if medical science is to have a place in the Legislature, and if we are not satisfied to allow the rank and file of the profession, numbering nearly 30,000 members, to remain

silent. If there was a contest to-morrow, the medical electors of the University of Dublin, if they voted together, would be able to turn any election. If we cannot claim superiority in wealth we can, at least, in the wisdom and knowledge of the hidden mysteries of life and death. Whilst the power of riches and exalted wordly position decline, that of scientific intelligence will increase. The profession which does most for suffering humanity is the least to be recognised in the unequal distribution of honours. Dr. Wylding says that a cynical silence and inactivity will not alter matters, and power will not come to those who stand by mere idle lookers-on. Unity of intention, organisation, and consolidation of forces will be necessary to obtain reform even for ourselves, and the infusion of high self-respect and dignity, if we would take our rightful share in the leadership of thought on great social, scientific, and sanitary subjects. Furthermore, legislation will be very different, in the future, owing to the education of the masses, and increase of knowledge on the questions which affect the health and happiness of their lives. To help in these social changes, and to guide them into safe channels is a high and noble task, and one for which the medical profession is eminently fitted by its knowledge, by its sympathy, and, above all, by its sincere unselfishness. And now let me for a moment invite attention to the position of our brethren in the army. Ten years ago, gentlemen, I warned you against entering the Army Medical Service, as I compared it then to a series of dissolving views of which we were at that time, in an interval, waiting for the next picture. I told you the remedy was simple, for if the gentlemen, who had an ambition to serve their Queen and country, would only hold back for a short time they would compel the authorities to rectify the glaring and iniquitous defects by placing the army medical officer in his proper position, and giving him, in all fairness, equal advantages with his less scientifically educated combatant brother officer. I am happy to say my advice was taken, and the authorities were compelled, for want of men, to remedy many defects, but not all, as some few still remain; and we, civil practitioners and hospital teachers, with all the weight of our influence, are bound to speak, write, and agitate in a forcible way, by reason and common sense, to remove the grievances and hardships our military brethren at present suffer from. For, by the Queen's Regulations, the army medical officer is

precluded from publicly ever making known his troubles and injustices. The present Director-General, Sir Thomas Crawford, has done his best to improve the professional status and scientific position of the army surgeon. Promotional and higher grade examinations have been adopted, which, doubtless, must considerably raise the tone of the whole profession. The army surgeon has a grievance which should be at once remedied. It appears that the commissions of those for the Indian Medical Service are dated from the period of joining Netley, while those for the Army Medical Department bear the date on which the course of instruction closes. The practical result of this difference is, that the Indian Medical Officers become the seniors of the others by four months, and this seniority must continue throughout their career, at least till they reach the administrative ranks. Formerly the rate of dating from the period of joining at Netley applied to both services, but the change was effected by the Warrant of 1877, *for reasons which have never been explained*. Furthermore, I feel a great injustice is frequently done to our army medical officers, who serve in unhealthy climates looking after the lives and health of the brave soldiers committed to their care. They may never have the luck to be in an engagement, and because they do not happen to see or hear a shot fired they are never decorated. Surely this is not fair or reasonable. Take, for example, the onerous and exhaustive duties of the chief administrative army medical officer in charge of a base hospital at some distance from active hostilities. No one, who is not conversant with the minute details of his duties, can really understand the wear and tear of mind and body such an officer endures, and yet this officer never gets any credit; his work is perhaps not known, and his name never appears in despatches. I would have all this changed. I would propose, if the military authorities do not do their duty to their medical officers the corporations and licensing bodies from whom the medical officers have derived their diplomas should, from time to time, confer honorary high degrees on such as have proved themselves deserving of such distinction. In this way the decoration would be of more value, for it would be awarded by competent judges who can distinguish high professional service on the part of the army medical officer, not perhaps in the battle field but in the prevention, cure, or alleviation of disease in out-breaks of fever, cholera, and other fatal disorders. Another scandal, which should not

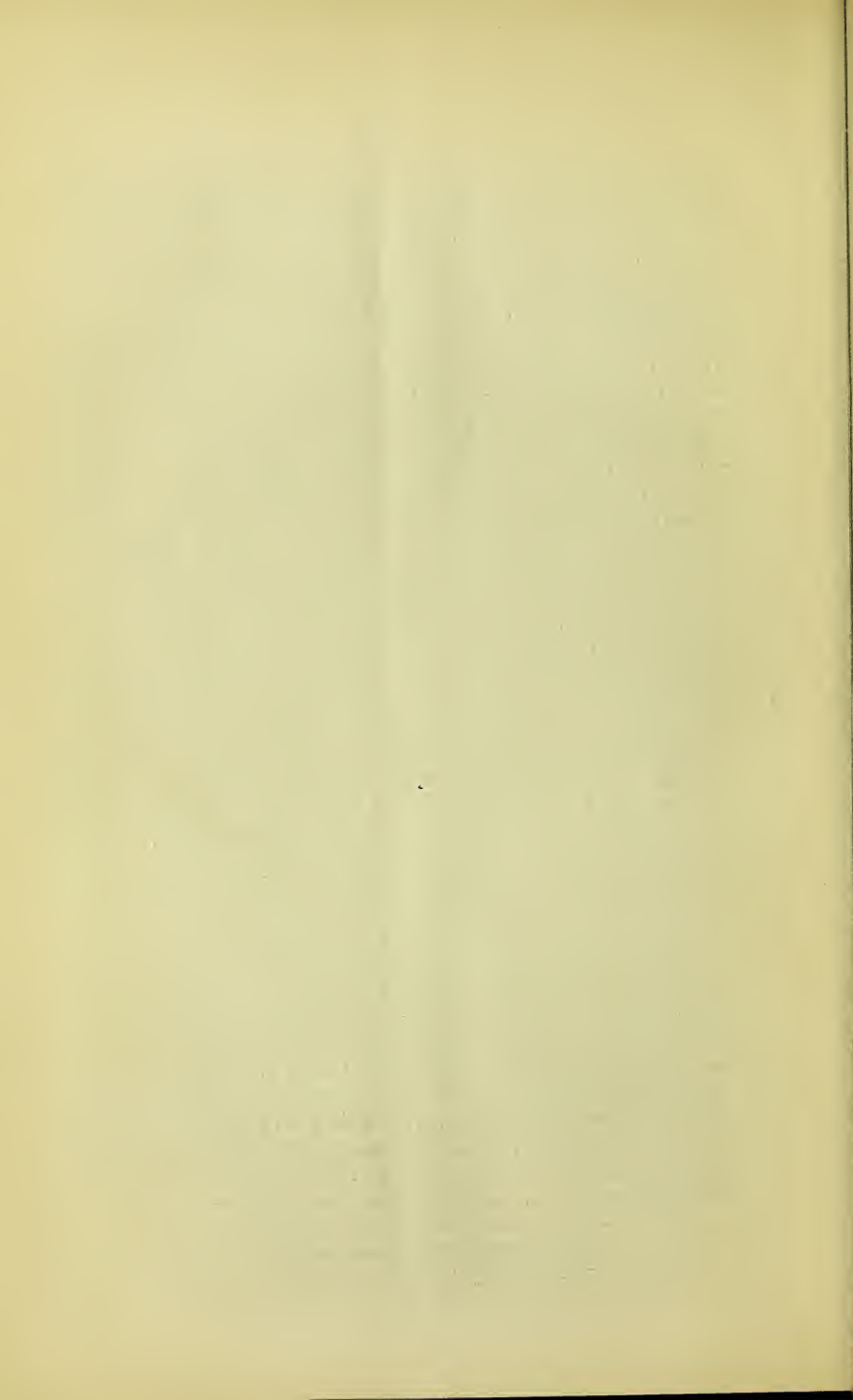
continue one day longer, is the meagre and miserable name by which the Army Medical Service is known, namely, *Medical Staff*—a meaningless term. It might just as well be civil as military. I know when the Army Medical Service was made a departmental system in 1873 every army surgeon was sure it would be raised to a "Royal Corps." We have Royal Engineers, a corps more like the Army Medical Service than any other, in work and division of labour. Then there is the Royal Artillery, Royal Marines, and many other regiments termed Royal, but the moment it is proposed to confer it on doctors, prejudice and class-feeling intervene to stand between the Queen's wishes and her faithful servants in the Medical Service; for it is known that her Majesty wished to do it, but the Duke of Cambridge barred the way. In 1883 Lord Morley's Committee recommended that the Medical Service should be made a Royal Corps, but again it was refused. The doctor class apparently has to work hard, but never to think of being honoured or rewarded. I do not like to prophecy, but I am inclined to think that before long you will see the Service termed as it in all justice ought to be, Royal Medical Staff. And by making the Service Royal its *esprit de corps* would be increased, and better officers would join it, and so its efficiency and social position would be improved. Until the civil profession pronounce an emphatic opinion against this injustice and realise that any honour given to the army surgeon is honour given to themselves, and that any slight to one body is a slight to all, no great progress will be made, and it will be in the power of prejudiced opponents to refuse well-earned honours. Let the army surgeon have patience, for his civil brethren will continue to agitate, because their cause is a good one, being just and reasonable. At no more fitting occasion could our gracious Queen, in this her jubilee year, grant the title of Royal to the most important branch of her service. Again, the Privy Councils of England and Ireland have been apparently reserved from time immemorial for lawyers, judges, military men, some divines, and peers of the realm, but again class prejudice comes in, and doctors are excluded from taking their seat on the Privy Council. Would anyone with a spark of sense give the reason for this? Why should they not be entitled to be dubbed Right Honorable as well as many other men far inferior to them in birth, position, and scientific knowledge? On what grounds are we excluded as a class? Simply I would say, because we have never attempted to break down

that ignorant prejudice and prove our own importance and insist that science will and must have a place in every arena in the kingdom. I would remark that Ireland is in advance of England in some degree, for within a few months one of our order, a Fellow of the Irish College of Surgeons, has been advanced to the position as a Privy Councillor in the person of Sir John Lentaigue, C.B. and F.R.C.S.I., and I sincerely congratulate him inasmuch as he is the first medical man who has taken his seat at that board. It is sad, however, that the authorities should have waited so long, even until he had reached the age of 84, when the ardour of manhood was very high past. Still with progress, slow as it has been, we may yet hope for better things, and see some few more of our representative men, not so advanced in life, appointed Privy Councillors.

Gentlemen, I feel sure you are wearied with the many topics I have crowded before you, and now, in conclusion, I wish to say a few words to my junior hearers. Many of you are young men, fresh from the country, with that buoyancy of spirits common to your age, without much ballast to freight you over the giddy whirlpools of a residence in town, and let me instil into you the fact that your early student life offers the best criterion we have of what your future professional life will be. All present, I am sure, wish to succeed, and you would like me to tell you how success is to be attained. Of one thing I am convinced, and that is that no such word as *impossible* should find a place in your vocabulary. A young man, I feel certain, can be very much what he pleases. You are now at that period of life in which you must turn to the right or left. You must now give proofs of principle, honesty of purpose, determination, and strength of mind, or you must sink into idleness and acquire the habits and character of a desultory ineffective creature, and if you once fall into that condition you will find it no easy matter to rise again. "Only a clod" is a title that many an individual deserves from the peer to the peasant, a well-dressed mass of material—nothing else—a most melancholy condition, and yet hundreds you meet in a day's walk are only "clods," more by their own fault than otherwise. They say "It is too much trouble to be anything else, and that life is not worth living if you worry yourself with thinking and striving to improve the condition of your fellowmen." How loathsome the lives of such appear to scientific medical men, who labour from

morning till night in alleviating human suffering, and who receive in one day hundreds of impressions of life, showing how the poor live and many of the rich fritter their lives away in degrading vice and intellectual heathenism, living the life of a clod, killing time as best they can, or indulging in pastimes neither honourable nor manly. I urge you to avoid such a course. Have "go" in your work. If you have not go—which is nothing more than latent energy—absorb it, imitate it, develop it, for without go, principle, and honesty, you will certainly be worsted in the battle of life. Pursue unflinchingly a course of irreproachable truth and rectitude, and you need fear nothing, nay, even the most sharp and cunning shafts that others, jealous of your progress, may choose to aim at you. The self-approval of your own conscience will be always to your own heart an infallible antidote against their poison. And again, as far as your worldly interest is concerned, rest assured of this, that the world itself will seldom or never allow you to suffer from any unjust attacks uttered by the tongue of professional Slander, or from any false detraction dictated by a mere spirit of crooked malice. On looking to your future prospects, you may think every post of honour and of emolument is already occupied—every avenue to fame and fortune already crowded with aspiring candidates. You turn, it may be, with disgust from the scene; with desponding mind you begin to imagine that success is impossible. Now, all this is founded on mistaken views of human life. A few brief years will level all distinctions. As you advance, you will find all the busy actors, who now so greatly fill your imagination and excite your fears, sinking, one by one, and leaving vacant more than enough to gratify your ambition. Begin life, then, with a manly courage, no matter what line you intend to follow. Cast far behind you that cold-blooded philosophy which would teach you that you are not to expect success. Remember that it is a law of the Almighty Himself, verified by the experience of every-day life, that honest endeavour, with a firm and humble reliance on Providence, will, sooner or later, meet with its reward; and none of you need fear that you will be made exceptions to the general rule. And remember also that—

"The heights by great men reached and kept,
Were not attained by sudden flight,
But they, while their companions slept,
Were toiling upwards in the night."



NEWSPAPER ARTICLES ON ADDRESS— LAY AND MEDICAL.

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From *Dublin Evening Mail*, November 1st, 1886.

THE MEDICAL PROFESSION.

To-day at the Meath Hospital Mr. ORMSBY, Fellow of the Royal College of Surgeons, opened the 136th Session of that excellent and time-honoured institution with a remarkable address. Leaving the beaten track of hospital lecturers who delight in giving first year students a vista of the extensive fields of knowledge which they have to explore, he applied himself with characteristic vigour to the task of indicating impediments to professional advancement and vindicating the claims of the leaders of his profession to State honours equally with the leaders of any other profession. Moreover, having regard to the increasing importance and the indispensable utility of the profession to society, he suggested as a topic for the Cabinet the desirability of having a Minister of Health and Sanitary Science. Once a medical man attains Cabinet rank, a peerage follows as of course. Mr ORMSBY was glad to notice as a step in the right direction the appointment of Sir John Lentaigne, a member of his profession, to the Irish Privy Council; but he complained that the honour had been too long delayed. He also splintered a lance in aid of his brethren in the army, claiming for the Army Medical Service the prefix "Royal," like the "Royal Artillery," or "Royal Engineers," and suggesting the Queen's Jubilee as a fitting occasion upon which to confer the coveted compliment. His audience, comprising several distinguished members of the profession, besides a large concourse of students, accorded the full measure of applause that his earnest advocacy on behalf of his order deserved.

From *Irish Times*, November 2nd, 1886.

In his lecture before the Meath Hospital yesterday, Mr. HEPENSTAL ORMSBY took what in the current language might be called a new departure. He did not devote himself to the examination of any abstruse medical or surgical practice or theory, but chose rather to speak to the general public and to the heads of the State, of the medical profession and the neglect of its position and claims chargeable against successive Governments.

We like this speaking-out on behalf of a great and honourable profession. "I fail," he said, "to see why the profession of medicine should not hold at least as high a place in the public estimation, and in that of the State, as any other profession; as, for instance, the Army, the Navy, the Bar, aye—even the Church itself. As regards State recognition, the medical profession, in comparison with the others, comes last of all. The public can easily judge what a gain it would be to the community to have the benefit of the experience of medical men in legislating for the prevention of disease and the promotion of the health and comfort of the working classes." This position will be freely allowed to the medical profession, and nowhere more readily than in Ireland, in consequence of the distinction attained by its leading men, not only in Great Britain, but throughout Europe. The question of recognition of these claims by the bestowal of public honours Mr. ORMSBY also boldly noticed, and upon that subject we have only to repeat what we often said, that the stinted and grudging acknowledgment of Irish eminence is not only an injustice to the profession, but a mistake in a large sense. Mr. ORMSBY suggested the propriety of adding a Minister of Health and Sanitary Science to the constitution of our Legislature with a seat in the Cabinet, and in support of such a proposition he quoted the trenchant words of the late Lord Beaconsfield, who said that "a policy that diminished the death-rate of a great nation is a feat as considerable as any of the decisive battles of the world." The lecturer ridiculed the backward condition of the authorities as regards the Privy Council in England and Ireland, and complained that it was apparently reserved for every calling except his own. He complimented the Irish Authorities in at last awaking to reason and common sense in appointing for the first time a member of the medical profession to the Irish Privy Council. Mr. ORMSBY drew attention to the fact that the Army Medical profession was as well entitled to the prefix Royal as any other branch of Her Majesty's service, and he could not understand why the latter should not be known as the Royal Medical Staff, the same as the Royal Artillery, Royal Engineers, and many other military departments.

From Freeman's Journal, November 2nd, 1886.

Exclusive of its claims to respect as a friend to suffering humanity, the Meath Hospital will be remembered from its connection with Whitley Stokes, so often mentioned in "Tones' Diary," and also because it was the theatre of the triumphs of Dease, the father of Irish surgery, to whom a splendid monument was unveiled last summer by Lord Aberdeen. Dease, it is said, was

a United Irishman. He died in 1798, under circumstances needless to detail here. In the historic house just mentioned Dr. LAMBERT ORMSBY yesterday delivered an inaugural lecture of unusual fulness, strength, and piquancy, on "The Social, Scientific, and Political Influence of the Medical Profession in 1886," just as—some years ago—he dealt with its "future prospects" in a clever *brochure* published by Fannin. Paley once said that there was nothing so uncommon as common sense; but if he had been present yesterday he could not have failed to recognise its vigorous existence. In another column will be found some extracts of Dr. ORMSBY's lecture. He seems to be most popular, and was warmly applauded during the delivery. Sir William Stokes occupied the chair, and Sir George Porter moved a vote of thanks to the lecturer, cordially recognising the originality, freshness, and courageousness of the address.

From *Daily Express*, November 2nd, 1886.

The winter session of the Dublin Medical Schools opened yesterday, with not a merely formal ceremonial, but with an intelligent and earnest purpose, which has a twofold claim upon the attention of the public. Addresses were delivered, in accordance with a practice which has sprung up in comparatively recent years, and is at once a tribute and an incitement to popular sympathy and interest in the noble work of the profession. The eminent men who inaugurate the educational work of the School by their addresses speak to a much larger audience than the classes of pupils and the troops of friends who will fill their lecture halls. Their observations, while primarily intended to animate and encourage the students, have another object to serve which is not less important. They bring the profession generally into touch with society. The profession feels the social and economic pulse, and appeals—and, happily, seldom appeals in vain—to the intelligent sympathy of the whole country, while showing at once its duties, its wants, and its claims. On such occasions it is not only legitimate, but useful to the interests of society, as well as of the profession itself, to bring under public observation the difficulties which it has to contend with, and the grievances of which it has to complain. Society cannot with justice or with safety ignore the fact that its interests are identical with those of the profession, and that all that tends to elevate and secure the status of the medical scientist, whether he be a physician or a surgeon, affords stronger grounds of confidence in the knowledge and skill which are required to alleviate the ills that flesh is heir to. Two addresses were delivered yesterday, which challenge attention for different reasons—one for its vindication of the rights of the profession; and the other for the light which it shed upon

the path of medical science, and its progressive development. Not only the medical profession, but the public at large, will feel indebted to Dr. LAMBERT H. ORMSBY for his pre-eminently practical address at the opening of the Winter Session of the Meath Hospital. Dr. ORMSBY proved by arguments which seem unanswerable that there can be no valid reason in truth, in justice, or in common sense, why the highest honours of the State should not be conferred on the medical as well as on the legal profession. The gentlemen of the long robe uphold the legal rights and defend the property of mankind. The disciples of Æsculapius rescue the lives of men, from the prince to the peasant, out of the jaws of death. Their avocation, therefore, would seem to be more solemn, more dignified, and more arduous than the profession of the law. When we seek for some reason to justify the exclusion of the medical profession from the honours of the peerage, and even from distinctions of lesser rank, which are freely bestowed upon other professions, we can find none, and can only explain the anomaly in the way pointed out by Mr John Morley in his work on Rousseau, namely, that when nations have been moving in certain traditional grooves for many generations, it requires an effort of unusual energy to impel them into a new and correct course of action. It is quite true, as Dr ORMSBY showed, with much force and feeling, that not only is the avocation of the physician of the noblest order, but the trials and perils incident to the pursuit of the medical profession are arduous and formidable, calling for the exercise of the higher qualities of character. The grievances of the Army Medical Department formed a subject of suggestive comment. Under the old system, when England rose supreme from the struggle that culminated in Waterloo, the surgeon was an officer of his regiment, and invested with all the dignity of true regimental brotherhood. All this, as well as many other things, are now changed by the experimentalists who call themselves reformers. The surgeon is now an alien and a stranger in the army. This has injured the prestige of the profession, lowered its tone, and had a bad effect on the service generally. The reflecting public, we think, will heartily join in Dr ORMSBY's spirited and manly protest against the unwise and unjust treatment of the profession, and, we trust, will make amends for the past by the adoption of a more generous and equitable policy.

MEDICINE AND THE STATE.

From *The Hospital Gazette and Students' Journal*, November 13th, 1886.

At the Meath Hospital, Dublin, last week Mr. L. HEPENSTAL ORMSBY, F.R.C.S., delivered a most remarkable inaugural address in opening the 136th session of the institution, on "The Social, Scientific, and Political Position of the Profession in 1886." Leaving the beaten track of hospital lecturers who delight in giving first year's students a sketch of the extensive fields of knowledge which it will be their duty to explore, he applied himself with characteristic vigour to the task of indicating the impediments to professional advancement and vindicating the claims of the leaders of our profession to State honours equally with the leaders of any other profession. "I fail," he said, "to see why the profession of Medicine should not hold at least as high a place in the public estimation and that of the State as any other profession—as for instance the Army, the Navy, the Bar—aye, even the Church itself. As regards State recognition the Medical Profession, in comparison with the others comes last of all." Mr. ORMSBY then urged in strong and vigorous language the advisability of elevating some of the leaders of the profession to the House of Peers, which, he said, apparently was reserved for the leaders of every profession except his own; and in support of his proposition he said:—"For it seems to me that nothing but the blindest prejudice—a prejudice unworthy of enlightened and honest statesmen—can have so long stayed the hand of the Sovereign and prevented the elevation of representative men of our order to seats in the Upper House, which Lord Salisbury once told the country was chiefly valuable because it represented success in all lines of public usefulness from commerce to statesmanship. The late Lord Beaconsfield also stated in a speech delivered on November 9th, 1875, 'that a policy that diminishes the death-rate of a great nation is a fact as considerable as any of the decisive battles of the world.' Mr. Gladstone, too, has frequently spoken in strong terms of admiration of the increasing importance of medicine and the medical and surgical professions. 'That profession,' he said, 'presented a future of the highest interest. There was in that future the probability that it would gain *increased influence*—greater as compared with other professions.' "

There is no doubt these statements are very true, and complimentary, but we regret to say they have proved mere empty words up to the present. We must only hope for better things in the future.

Mr. ORMSBY then suggested that in the constitution of our governmental system there should be, and he said it was im-

peratively called for, a Minister of Health and Sanitary Science, who should occupy a seat in the Cabinet, and to be only filled by a physician or surgeon of eminence and ability, and not bestowed on some worn-out practitioner when his limbs are feeble and his brains past their work. The lecturer then ridiculed the backward condition of the authorities as regards the Privy Council of England and Ireland, and complained that it was reserved for all other callings except medicine and surgery. He complimented the Irish authorities on at last awakening to reason and common sense in appointing a few months since for the first time, a member of the medical profession to the Irish Privy Council.

Mr. ORMSBY also splintered a lance in aid of our brethren in the Army Medical Staff, drawing attention to many of their present grievances, and claiming for the service the prefix "Royal," like the Royal Artillery and Royal Engineers, suggesting the Queen's Jubilee as a fitting occasion to grant this just and well merited compliment to the most important branch of Her Majesty's service.

In a short notice of this kind it is impossible to draw attention to all the points touched upon by the lecturer, but we believe it will be published in pamphlet form, and will well repay a careful perusal. We only wish more of the hospital teachers would speak "right out" their convictions, and thus help to elevate the tone of our noble profession.

THE OPENING OF THE MEDICAL SCHOOLS.

MEATH HOSPITAL, DUBLIN.

From *The British Medical Journal*, November 6th, 1886.

On November 1st the Medical School of the Meath Hospital was opened for the session by an address by Mr. L. HEPENSTAL ORMSBY, F.R.C.S.I., who took for his subject "The Social, Scientific, and Political Position and Influence of the Medical Profession in the year 1886." After pointing out the eminent position held by the best representatives of the profession in Ireland, he dwelt on the impediments to the advance of the profession as a body; he instanced especially the absence of any uniform State-qualifying examinations, the small incomes to be gained in sparsely populated parts of the country, the prevalent public belief in quackery, and the absence of suitable State recognition for the leaders of medicine and surgery. A Minister of Health or Sanitary Science, with a seat in the Cabinet, to be filled only by a physician or surgeon of eminence and ability,

was imperatively needed. Scientific medicine must and would take an exalted position in the world when the component parts of the great ship of State were properly arranged and reformed. Among the many subjects about to be brought before Parliament at no distant date, and which emphatically demand the best attention of a sound medical opinion, he mentioned the health and management of prisoners, the treatment of habitual drunkards, the proper housing of the working classes, further restrictions as to the pollution of rivers, opposition to compulsory vaccination, the improvement of the Lunacy Laws, improvement in the Sanitary Laws, the Contagious Diseases Act, and last, but not least, the vivisection question. The late Lord Beaconsfield had said "that a policy that diminishes the death-rate of a great nation is a feat as considerable as any of the decisive battles of the world." Mr. Gladstone also had frequently spoken in strong terms of admiration of the increasing importance of medicine and the medical and surgical professions. "That profession," he said, "presented a future of the highest interest. There was in that future the probability that it would gain increased influence, greater as compared with other professions." He expressed the opinion that the recognition accorded to the medical officers of the public services by the State was inadequate, and urged that the corporations and licensing bodies from whom the medical officers derived their diplomas, should, from time to time, confer honorary high degrees on such as had proved themselves deserving of the distinction. He claimed for the Army Medical Service the prefix "Royal," like the "Royal Artillery" or "Royal Engineers," and suggested the Queen's Jubilee as a fitting occasion upon which to confer this title, which had been recommended by Lord Morley's Committee in 1883. He then pointed out how the Privy Council of England and Ireland had been apparently reserved from time immemorial for lawyers, judges, military men, some divines, and peers of the realm, but that medical men had been excluded by class prejudice. Ireland, indeed, was in advance of England in some degree; for a Fellow of the Irish College of Surgeons had recently been advanced to the position of a Privy Councillor in the person of Sir John Lentaigue, C.B. and F.R.C.S.I. He was the first medical man who had taken his seat at that board. In conclusion Dr. ORMSBY expressed the hope that honours of this kind would in future be more freely conferred.

ARMY MEDICAL REFORMS.

From *The Medical Press*, November 24th, 1886.

Mr. ORMSBY's address at the Meath Hospital, besides that it offered a sensible and practical suggestion for improving the social and professional rank of the medical officers of the Army and Navy as a whole, will serve an excellent purpose in recalling attention to the existence of certain very palpable grievances under which those officers suffer, and which, from motives both of justice and expediency, ought to be redressed.

The invidious position which the medical staff are made to occupy, in comparison with their combatant fellow-officers, has been an old, but nevertheless a stirring text for the *Medical Press* as well as for others of our contemporaries; yet, though it is very gratifying to us to know that much cause of complaint has, in consequence of persistent agitation, been removed by recent warrants, it is painful to have to recognise in those in authority the disposition to leave the work of redress uncompleted.

A cogent illustration of this is afforded by a review of the position of the medical officer who is incapacitated from service before he has served for ten years. If the medical officer has served less than three years he can receive no compensation at all unless he is invalided by wounds in action; if he has served over three years, and is broken down by the service, he *may* be granted sick leave until he recovers; but he is allowed six months to do so, and may get an additional six months if the authorities please. The combatant officer is privileged, in the opinion of the authorities, to suffer from more chronic disease, for he is allowed two years to recruit his health. If the medical officer is compelled by ill-health to retire before his tenth year of full-pay service, he has no legal claim to either gratuity, compensation, or pension. If he has passed his tenth year, or reached his twentieth, he, unless in exceptional cases, is given a gratuity varying between £1,250 and £2,500, and summarily turned out. Now, what does all this mean? It means briefly, that if a medical officer is broken down by service when quite young he may starve, while, if he is incapacitated in middle age, he has nothing to depend on for livelihood except interest money, amounting at least to £1 a week, and at most to £1 15s.

It is hard to understand how such an injustice to one particular branch of the service could be defended, especially as the regulation which inflicts it is a retrograde movement, for the original regulation entitled the officer to pension after five years' service. In fact, no pretence of defence has been made when the system has been attacked in the House of Commons, but answers have been given which show that, if the protest of the Service were energetically and perseveringly pressed, the War Office must give way.

The influence which has been at work in the framing and maintenance of these regulations—that of an unreasoning jealousy on the part of the “combatant” rulers of the service—has shown itself in many other directions. For instance, all combatant officers are allowed to reckon one year on half-pay, if caused in and by the service, as full-pay towards retirement, and all officers of the Royal Engineers towards promotion as well as retirement, while the medical officer is given no credit at all for his half pay time under similar circumstances. Again, if the medical officer be wounded in action, or incapacitated by ill-health—the result of climate and exposure—and be ordered on half-pay, he must incur a penalty which no other officer in the action incurs, that of having his junior placed over his head and remaining his senior all through his service.

These and other instances in which invidious and hurtful distinctions are made between the medical officers of the army and their brother-officers of other branches require explanation, and the War Minister has been from time to time put in the humiliating position of formulating in the House of Commons the lame excuse put into his mouth by the War Office authorities. And what is the excuse? In March, 1881, Mr. Childers, then Secretary of State for War, replying to a question put by Mr. Findlater, in the House of Commons on the subject, said:—“That medical officers were exceptionally dealt with, on the grounds that they were non-combatant officers, and not officers within the meaning of article 71 of the warrant.”

Here we have an assertion of the principle which has been depended on to justify the persistent but covert hostility which has been manifested towards the Medical Service, a principle which is nullified not only by fact and by common sense, but by the regulations of the Service. Everyone knows that in our modern warfare, the medical officers are, as regards the dangers of service in the field, to all intents “combatant;” for not only is their loss by wounds in action frequent, and the record of their personal valour before the enemy constantly before the public, but their daily avocations, when not in presence of the enemy, are in the highest degree those of “combatant” with disease, miasm, and infection from the onslaughts of which their brother-officers of the fighting department are to some extent protected. The Queen’s regulations, moreover, ignore, and very properly ignore, the distinction which the jealousy has set up, for they declare that the medical officer’s place in action is “in close proximity to his corps and never losing touch of them.” We repeat, therefore, that the prejudicial distinction drawn between “combatant” and “non-combatant” officers does not in truth exist, and the perpetration of injustice would never be

tolerated by Parliament on the ground of such distinction if brought clearly and perseveringly under its notice.

We have recapitulated some of the most obvious grievances which need redress; but there is one other which demands attention, and cries out for a remedy. It is this—On the conclusion of the competitive examination at Burlington House, at which the candidates for the Home and Indian Medical Services compete side by side, the successful competitor is supposed to be gazetted to the Medical Staff or Indian Medical Service as surgeon, with the relative rank of Captain. But this equality of position of the successful competitors is quite illusory, inasmuch as the commissions of those for the Indian Medical Service are dated from the period of *joining* at Netley, while those for the Army Medical Department bear the date on which the course of instruction there *closes*. The practical result of this difference is, that the Indian Medical officers become the seniors of the others by four months, and this seniority must continue throughout their career, at least till they reach the administrative ranks. Formerly, the rule of dating from the period of joining at Netley applied to both services, but the change was effected by the Warrant of 1877, for reasons which have never been explained. It was, at the time, believed that the object of this alteration in the Warrant was to minimise the importance of Netley as a training school with a view to its extinction, that establishment being at the time unpopular at the War Office. It was supposed that the new rule was a hint to probation surgeons that their study at Netley was not considered to be of any value, and might be neglected; but the War Office did not appear to notice or to care that the effect of the change was to injure the prospects of the medical officers of the home service by placing them in a position of juniority towards those of the Indian army.

Mr. ORMSBY, in his address at the Meath Hospital, has recently called attention to these in spirit and words with which we have perfect sympathy, and has proposed a change which seems to us practical and reasonable, and worthy of being strenuously urged upon public attention. "Another scandal," said Mr. ORMSBY, "which should not continue one day longer is the name Medical Staff by which the Army Medical Service is known—a meaningless term—which might just as well be applied to civil as to military service. When the Army Medical Service was made a departmental system in 1873, it should have been raised to the dignity of a 'Royal Corps.' We have Royal Engineers, a corps more like the Army Medical Service than any other in work and division of labour; the Royal Artillery, Royal Marines, and other services termed Royal, but the moment

it is proposed to confer a similar title on doctors, prejudice and class feeling intervene, to stand between the Queen's wishes and her faithful servants in the Medical Service ; for it is known that her Majesty wished to grant this designation, but the Duke of Cambridge barred the way. In 1883 Lord Morley's Committee recommended that the Medical Service should be made a Royal Corps, but again it was refused. And by making the service Royal its *esprit de corps* would be increased, and its efficiency and social position would be improved. At no more fitting occasion could our gracious Queen, in this her jubilee year, grant the title of Royal to the most important branch of her service."

It is not now for the first time that these grievances and many others to which space does not allow us to refer, have been brought to public notice. That they have not been realised by Parliament and the public arises, as we think, from the fact that the efforts to instruct the public on the subject have been occasional and erratic, and have lacked continuity and energy.

The protests of the Army Medical Service must always be difficult to give voice to, because individual officers are put to silence by the regulations and co-operation amongst them, for public expression of their wishes is officially forbidden. It remains for those who sympathise with their position, and who don't care a straw for the Horse Guards, or the War Office, or for the autocrats who have those departments under their thumb, to force these matters upon the public mind ; and, inasmuch as the only professional organization which ought to take public action in the matter—the British Medical Association—has been manifestly "squared" by the authorities, a coercive duty devolves upon others to keep the subject hot.

We shall, with pleasure, do our share in hammering at it.



